

2013

Bexar County
Teen Pregnancy
Report

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Data prepared by John Berlanga, Metro Health Data reviewed by Anil Mangla, PhD, Metro Health

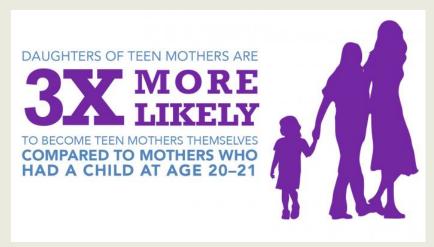
Thomas Schlenker, M.D., M.P.H., Director of Metro Health





Why Teen Pregnancy Prevention?

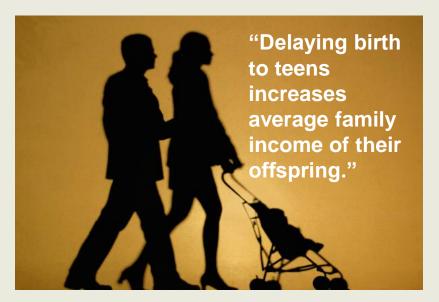


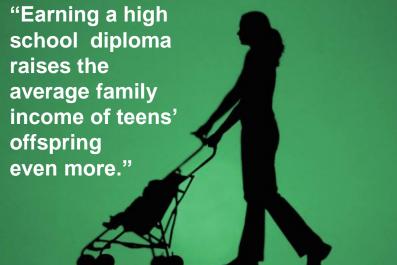






Prevention helps future children





Also, teens' offspring are less likely to be a teen parent;

- Slightly less likely to report symptoms of depression, and
- Less likely to describe themselves as being in poor health

Bexar County Teen Births 2010 - 2013

Females Ages 15 to 19







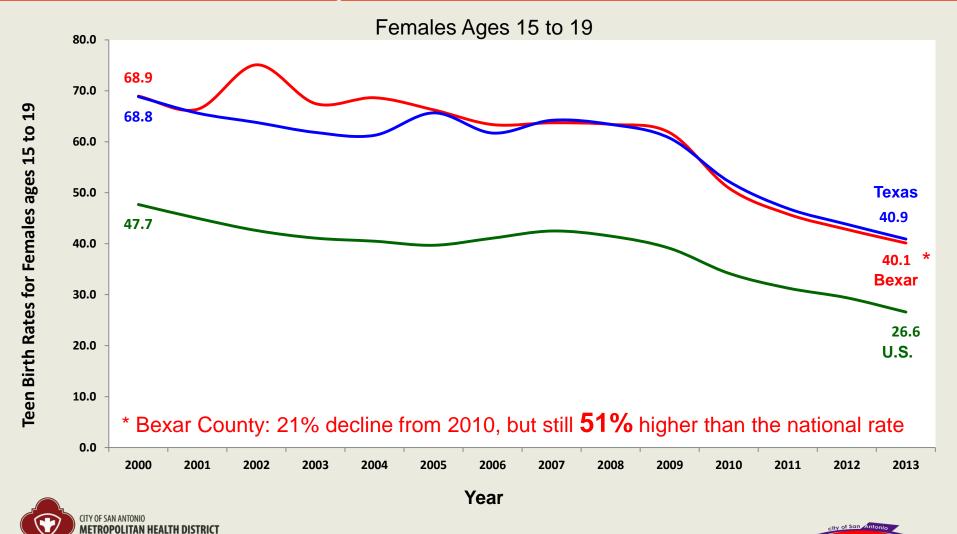


A 21% decline from 2010 to 2013





Bexar County Teen Birth Rate Declined by **42%** since 2000



2013 Costs of Teen Childbearing



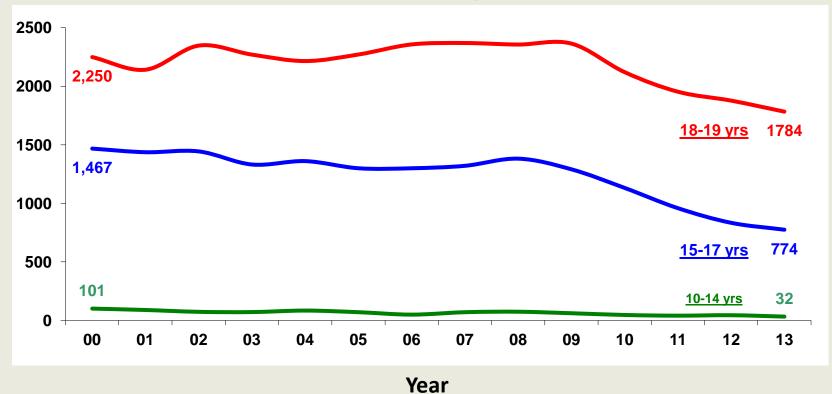
Costs include health care, child welfare, incarceration, lost revenue

Number of Teen Births

In 2013, **69%** of teen births were to females ages 18 to 19

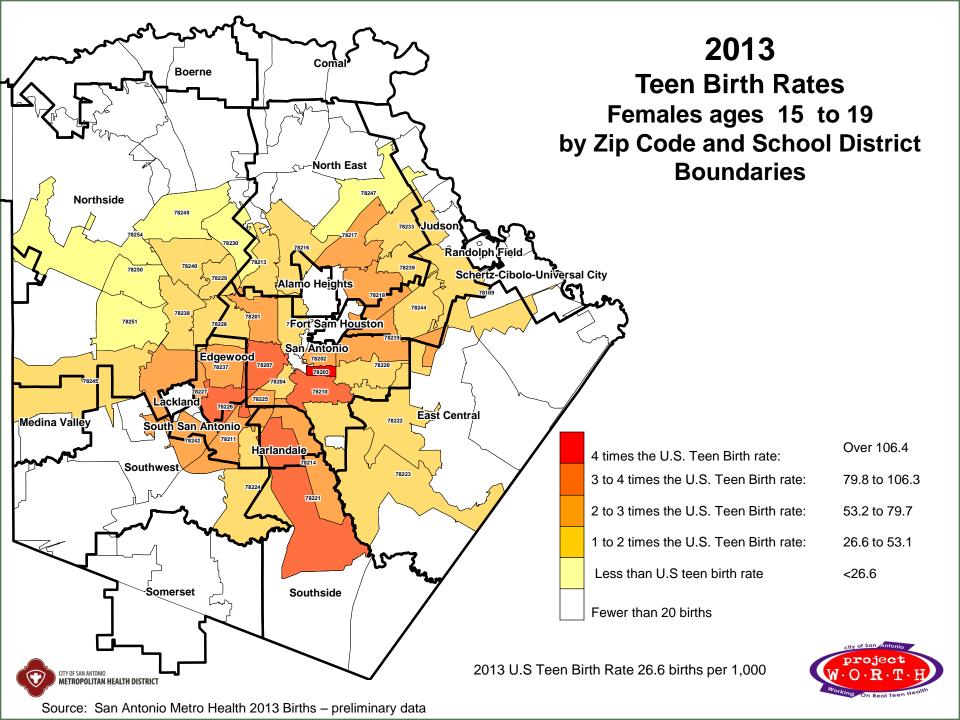
2000 – 2013 Bexar County Teen Births by Female Age Groups

2,590 total teen births in 2013...nearly **50** teen births per week









2013 Bexar County School District Number of Teen Births and Teen Birth Rates



SCHOOL DISTRICTS	2013 Births to Females 15 to 19 yrs
San Antonio	738
Northside	548
North East	377
Judson	172
Edgewood	146
Harlandale	139
Southwest	129
South San Antonio	121
East Central	75
Southside	55
Alamo Heights	1

SCHOOL DISTRICTS	2013 Teen Birth Rate Rate per 1,000 Females 15 to 19yrs
Harlandale	67.67
San Antonio	64.58
South San Antonio	60.29
Edgewood	55.81
Southwest	55.63
Judson	42.66
Southside	41.83
East Central	37.78
North East	29.33
Northside	28.54
Alamo Heights	-

Bexar County 2013: Age of Fathers of Babies Born to Mothers 19 and Under

Under 18



10%



Unknown



62% of fathers were 18 and older





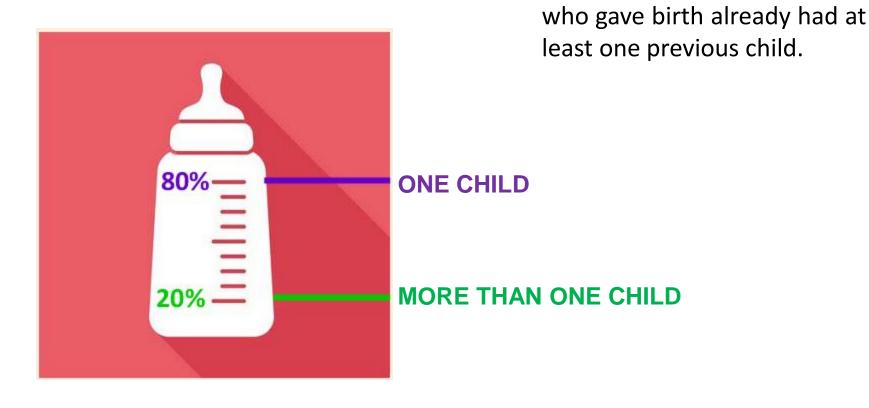
Bexar County 2013: Married Teen Mothers







Bexar County 2013: Repeat Teen Births





In 2013, **529** teen mothers

METROPOLITAN HEALTH DISTRICT

\$_2020 WORKGROUP

SAN ANTONIO TEEN PREGNANCY PREVENTION COLLABORATIVE

SA2020 INDICATOR:

Reduce the teen birth rate among females ages 10 to 19 in Bexar County by 25%.*

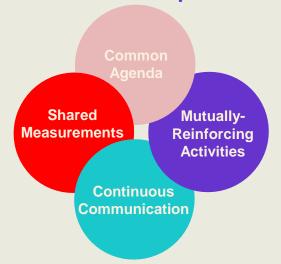
The collaborative consists of several organizations collaborating in five areas:

- 1 Stakeholder Education
- 2 Evidence-Based Programs
- 3 Youth Support & Development
- 4 Community Mobilization
- 5 Quality Adolescent Health Care

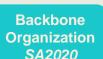
In FY 2013, The collaborative reached over **6,182** teens with evidence-based pregnancy prevention programs.



The collaborative follows the SA2020 Collective Impact Model.



Common Agenda SA2020 Vision























San Antonio Teen Pregnancy Prevention Collaborative BDL Logic Model

Determinants of Teen Behavior Teen Behavior Health Health Intervention Activities Indicators Goal **Evidence-based Programs (Effective programs):** Knowledge: -Level of parents' education and access to medically--Implement evidence-based sex education programs in Youth Serving Organizations (YSOs) including middle and high schools accurate information -Increase participation in evidence-based programs to foster care, -Teens' knowledge of factual, medically-based -Decrease the juvenile probation, and out-of-school youth including the 18-19 year information percentage of schoolold population -Teens' knowledge about condom and contraceptive age youth who have -Implement evidence-based parent education curricula use ever had sex. -Implement evidence-based home visitation programs to **Attitudes:** pregnant/parenting teens - Educational aspirations and planning for the future -Increase capacity of YSOs to evaluate their activities and programs - Perceived risk of pregnancy and STDs/HIV Decrease the -Attitude towards abstinence -Increase number of **Quality Adolescent Health Care:** -Attitude towards condom and contraceptive use **Bexar County** youth who are Teen birth rate -Increase provider/staff education to promote/advocate for: -Perceived self- efficacy in accessing and using teen birth practicing abstinence. for females ages -Teen friendly hours condoms and contraceptives 10 to 14 in Bexar rate among -Teen friendly (values neutral) attitudes from clinic staff -Partner attitudes towards sexual activity County females ages -Best practices regarding adolescent care to prevent teen pregnancy -Perceptions of sexual activity/abstinence among peers 10 to 19 by -Linkages from schools/YSOs to quality adolescent health care (or lack thereof) Decrease frequency 25%* by the -Perceptions of peers' use of condoms and of sex. Teen birth rate vear 2020. contraceptives **Community Mobilization:** for females ages Skills: -Create accessible, easy to understand messaging for the community 15 to 19 in Bexar Increase self-efficacy to: by way of social media and other outlets County -Abstain from sex -Create innovative strategies for engaging parents -Avoid risky situations -Develop teen pregnancy prevention campaigns -Access and utilize condoms and contraception -Develop strategies to engage faith-based communities correctly and consistently -Increase awareness of sexual abuse/coercion and dating violence -Access quality adolescent health care -Decrease **Connectedness:** incidence of -School performance sexual coercion. **Stakeholder Education:** -Faith-based attendance -Educate stakeholders about determinants of healthy teen behavior **Community:** -Ensure school/YSO policies include referrals to teen-friendly clinics -Awareness of high teen pregnancy rates in San -Advocate/promote funding that supports adolescent healthcare to prevent teen pregnancy -Social norms with regards to teen pregnancy -Advocate/promote policies that support use of evidence-based teen pregnancy prevention programs -Increase correct and/or consistent use Parent/Guardian involvement: Youth Support/Development: of condoms and -Family connectedness contraceptives. -Family support -Parental/Guardian supervision **Role Models/Support:**

Information compiled by UT Teen Health, UT Health Science Center at San Antonio *Based on the 2010 County teen birth rate of 50.6

-Presence of male role models -Influence of mentoring relationship

-History of prior sexual abuse or sexual coercion

Sexual Abuse: